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APPLICANTS

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** CONTINUING DATA *****
 This appln claims benefit of 60/198,688 04/20/2000 *SD*

** FOREIGN APPLICATIONS ***** *none SD*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 0	TOTAL CLAIMS 154	INDEPENDENT CLAIMS 51
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature	Initials	

ADDRESS

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TITLE

Use of thioamide oxazolidinones for the treatment of bone resorption and osteoporosis

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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